

PTO/RSB/81 (04-05)

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Application Number	09761421
Filing Date	
First Named Inventor	Robert L. Jones
Title	
Art Unit	
Examiner Name	
Attorney Docket Number	

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

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☒ Practitioner(s) named below:

Name	Registration Number
Leslie A. Thompson	54584

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Country	USA	Zip	20001
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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/RSB/06)

SIGNATURE of Applicant or Assignee of Record

Signature	Robert L. Jones	Date	1-30-06
Name	Robert L. Jones	Telephone	504 237818
Title and Company	Owner		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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Application Number	09761421
Filing Date	
First Named Inventor	Robert L Jones
Art Unit	
Examiner Name	
Attorney Docket Number	

I hereby revoke all previous powers of attorney given in the above-identified application.

☒ A Power of Attorney is submitted herewith.

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☐ I hereby appoint the practitioners associated with the Customer Number:

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<input checked="" type="checkbox"/> Firm or Individual Name	Leslie A. Thompson Esq. Registration No. 54584				
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I am the:

☒ Applicant/Inventor.

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SIGNATURE of Applicant or Assignee of Record

Signature	Robert L. Jones		
Name	Robert L. Jones		
Date	1-30-06	Telephone	504 237 8158

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